the Ukrainian military. Her exemplary time in uniform includes service in Iraq between 2004 and 2008 as a member of Ukrainian peacekeeping troops, during which time she served alongside and earned the respect of U.S. personnel, including Special Operations Forces.

In fact, her tour in Iraq overlapped with part of my own time serving in that theater. I personally know the hardships and exemplary work done by our coalition forces during that difficult period, including Nadiya's Ukrainian contingent.

She has since become a national hero and icon, serving in the 3rd Army Aviation Regiment and being recognized by Ukrainian defense forces and the United Nations. Nadiya also became a leading national figure in the Euromaidan demonstrations, which led to the fall of President Viktor Yanukovych.

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After Yanukovych, pro-Russian forces began stoking anger and violence across Ukraine's eastern provinces and the Crimean Peninsula. Lieutenant Savchenko then joined one of many volunteer, pro-government units that were organized to supplement deployed government forces. As the leader in the Aidar Battalion, she served alongside Ukrainian military personnel and civilians alike to quell the Russian-supplied, -trained, -supported, and -supplemented separatist forces.

On June 28, Nadiya was captured by the separatists. After several days of unknown whereabouts, she resurfaced in Russia in the custody of the Russian Government on charges of murdering two Russian journalists. Access to her by family and Ukrainian officials has been very limited, and calls for her release based on her illegal capture, transport, transfer, and detention have gone unanswered. This is unacceptable. As Americans, we must recognize those who have fought alongside us and those who have stood up for democracy and freedom across the globe. Furthermore, we cannot let international law and due process be violated by any entity or nation.

For these reasons, I call on the United States Government and the United Nations to take immediate action to seek release of First Lieutenant Nadiya Viktorivna Savchenko. If she, a citizen of the sovereign state of Ukraine and a war hero, is to face trial, she must be granted the full ability to do so in an open, transparent, and unbiased venue such as through the international court system or be granted the privilege of a full and proper investigation by her own country. Lieutenant Savchenko deserves due process of law. I further call on Russia to comply with its international obligations and immediately release Nadiya Savchenko to her family or appropriate authorities.

MEDICAID EXPANSION

The SPEAKER pro tempore. The Chair recognizes the gentleman from Georgia (Mr. JOHNSON) for 5 minutes.

Mr. JOHNSON of Georgia. Mr. Speaker, as a cochairman of the State Medicaid Expansion Caucus, I rise this morning to talk about how important expanding Medicaid is for my State and for every State in this great Nation.

It gives me great pride to be in the well of the House this morning speaking on the topic of expanding the Medicaid program today, the 49th anniversary of the date when the legislation creating the Medicaid antipoverty program was signed into law by President Lyndon Baines Johnson. More than 30 Members of Congress have joined the State Medicaid Expansion Caucus because we know that opening the way to health care for the poor is good, it is righteous, it is just, it is merciful. It is the right thing to do because, according to Matthew 25:40:

Whatever you did for one of the least of these brothers and sisters of mine, you did for me

And for those who have not a care about the poor, then you should know also that expanding Medicaid to more poor people will stimulate the economy by creating jobs in the burgeoning health care and other ancillary industries. More jobs mean more spending, which leads to more profits. For those of you who are only concerned about your bottom line, then you should also know:

Whoever is kind to the poor lends to the Lord, and he will reward them for what they have done.—Proverbs 19:17.

The stimulation of economies is exactly what expanding Medicaid has accomplished in the 27 States that have expanded eligibility. It is exactly what will happen in every recalcitrant State when their political leaders finally come to their senses and choose to accept the Federal funds to expand their Medicaid systems, the funds having already been paid into the system by their own taxpayers.

So 27 States, a majority of the States of this great country, looked at the facts and made the choice to help their people be healthier and therefore lead more productive lives. Expanding Medicaid in those States provided health care coverage to approximately 10.5 million people who otherwise would not have had it, according to Families USA.

Despite the politics, this is a bipartisan issue, as we see when Republican Governors in Arizona and Ohio, for example, expanded Medicaid. As a result of their action, almost a million people will have access to affordable health care. States led by Republicans and Democrats that expanded Medicaid should be commended for their actions. In California, almost 3 million people have benefited by getting access to health care when their State expanded Medicaid. These are just some of the success stories.

The Federal Government will cover 100 percent of the costs of expanding Medicaid today, and 90 percent of the cost for the duration of the program in every State. Expanding Medicaid will bring billions of Federal tax dollars back into States that will help develop the health care infrastructure and improve the economy.

It will also help low-income Americans access health care. We must remember that the people who will benefit from expanding Medicaid are no less deserving of health care than anyone else.

In my home State of Georgia, expanding Medicaid would mean access to health care for 684,000 poor people, according to the Center on Budget and Policy Priorities. The Georgia Budget and Policy Institute estimates that expanding Medicaid will bring \$65 billion in new economic activity to Georgia over 10 years, which will support more than 56,000 new jobs throughout the State. My Governor reacted to this news by signing a bill eliminating his own authority to expand Medicaid. I can't think of a time that a chief executive has willingly given away some of his authority.

We know why Governors and State legislators are choosing to deny access to health care for their people. It is politics, pure and simple.

I am here today to urge every State to expand Medicaid. I urge my colleagues and those watching at home to contact their Governor and their State legislator in support of expanding Medicaid.

$\begin{array}{c} \text{CONGRESS LEAVES WITH WORK} \\ \text{UNDONE} \end{array}$

The SPEAKER pro tempore. The Chair recognizes the gentleman from Wisconsin (Mr. RIBBLE) for 5 minutes.

Mr. RIBBLE. Mr. Speaker, one of the things that I am concerned about and I think every American is concerned about is the reputation of the Congress of the United States in the eyes of the American people. We know what our approval ratings are, and we are well aware of it; but we often don't take a moment and pause and say what are the things that we could do to have the American people once again view this Chamber, the people's House, as a place of honor, as a place that is actually doing the people's business.

Here we are, 48 hours away from a recess. We are going to be going back and talking with the people in our districts. Each one of us represents around 700,000 American citizens. We are going to go home and we are going to spend some time talking with those citizens, and I think that is appropriate. However, I also think it is appropriate for us to get our work done, and I want to talk this morning, Mr. Speaker, about a key fundamental requirement of the law of this Congress, and that is to provide the Nation and the American people with a budget that is fiscally secure and to provide

for spending bills under the law so that the money that the taxpayers are sending to Washington, D.C., they are aware of how that money is being spent.

This is 2014, Mr. Speaker. Leaving for the entire month of August was a tradition, as I have read, brought to this Chamber because of the extreme heat of Washington, D.C., prior to air-conditioning. But here we are in 2014, the building is air-conditioned and the building is a relatively comfortable place to work. We could stay here and actually finish up some of the work of the people.

For example, in 1974, four decades ago, the Congress of the United States passed a budget act and the President signed into law a budget act that required the Congress to actually pass a budget and to do its spending bills and complete them by September 30. In four decades, here we are on the 40th anniversary of that law. In four decades, it has not happened even one time when the Congress did its work and completed its spending bills within the amount of time allotted under the law. The American people are struck by that.

How can the Congress of the United States ignore the law? How can the Congress of the United States say we are going to find ourselves in agreement, Democrats and Republicans, House and Senate and the President, and we are going to agree to do these things? Well, quite frankly, the law had one weakness: it had no enforcement trigger in it.

A few years ago, a good friend of mine, a gentleman from across the aisle, Congressman JIM COOPER from Nashville, Tennessee, wrote a piece of legislation called No Budget, No Pay. A couple of years ago, we finally signed that bill into law—a part of it into law—and for the first time since I have been in Congress, the Senate of the United States actually passed a budget because they found out that if they didn't, there would be an enforcement trigger that happened.

I have recently written a bill called the Do Your Job Act, which would require the Congress to do all 12 of the spending bills prior to the end of the year or they can't recess for more than 24 hours. They have to stay here and do their job so the American people can see firsthand what our priorities are.

I came to Congress in 2011, and in the 4 years I have been here, we have been required by law to pass 48 spending bills. The U.S. Senate, in those 4 years' time, has passed two. The House has done quite a bit better. They have passed 24. But they are required to pass 48. This year, the Senate has passed zero. They have done none. The House of Representatives has passed seven, and has referred another four out of committee that are ready to go. We ought to stay here and pass those bills and send them to the Senate.

Mr. Speaker, this is the people's House. We ought to be here doing the

people's business for the good of the American people. We should stay here and do our job.

HEALTH EQUITY AND ACCOUNTABILITY ACT

The SPEAKER pro tempore. The Chair recognizes the gentlewoman from California (Ms. ROYBAL-ALLARD) for 5 minutes.

Ms. ROYBAL-ALLARD. Mr. Speaker, on behalf of my colleagues in the Congressional Hispanic Caucus, the Congressional Black Caucus, and the Congressional Asian Pacific American Caucus, I rise to introduce the Health Equity and Accountability Act of 2014.

The Congressional Tri-Caucus, over the past 10 years, has been tireless in its effort to educate Congress and the country about the disproportionate burden of premature deaths and preventable illnesses existing in our minority communities. Towards that end, the Tri-Caucus developed a national strategy for the elimination of racial and ethnic health disparities. The keystone of this strategy is the Tri-Caucus Health Equity and Accountability Act, first introduced in 2003 and every Congress since.

HEAA, in many ways, is unique. First, the bill and its introduction rotates each Congress among the three caucuses. This year, as chair of the CHC Health Task Force, I have the distinct honor of carrying on the tradition by introducing the bill for the 113th Congress.

Second, and most importantly, HEAA outlines the collective institutional knowledge of a diverse group of policymakers, health professionals, and advocacy organizations from throughout the country on what policies are needed to halt, reduce, and eliminate health disparities.

At the beginning of each new Congress, the HEAA working group convenes and several hundred minority and health advocacy organizations meet on a regular basis to discuss the bill and update it based on new research and recommendations to meet the ever-changing needs of our Nation's most vulnerable populations.

Also, just as the bill introduction rotates each Congress between Member offices, the leadership of the HEAA working group rotates among advocacy organizations. In the 113th Congress, this effort was spearheaded by the National Latina Institute for Reproductive Health, whose members I commend for their deep commitment to social justice and for their tireless work on this bill, which included coordinating the input of over 350 health and minority advocacy groups.

The HEAA is a principled living road map that can be used by policymakers and providers alike. For example, the Affordable Care Act contains many groundbreaking policies first introduced in HEAA, including expansion of Medicaid eligibility, increased resources for community health centers,

and institutionalizing Federal efforts to achieve health equity.

Nevertheless, while the ACA has made a significant impact on access to quality health care, many inequities and obstacles remain that prevent the elimination of health disparities in our country. That is why the HEAA of 2014 provides Federal resources and advanced policies to improve health outcomes in all populations regardless of race, ethnicity, immigration status, age, ability, sex, sexual orientation, gender identity, or English proficiency.

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The HEAA is made up of ten titles proposing a wide spectrum of health initiatives that address disparities and mental health and specific high impact minority diseases.

The bill also provides guidelines for improving the health outcomes for women, children, and families, and targets resources to communities striving to overcome negative social factors.

Finally, the bill includes recommendations to enhance data collection, technology, accountability, and evaluation; increase workforce diversity; and ensure access to culturally and linguistically appropriate care.

Mr. Speaker, the members of the Tri-Caucus and members of the HEAA working group believe no one's health or life expectancy should be determined by the color of their skin or the Zip Code in which they are born.

The Health Equity and Accountability Act of 2014 is a consensus blueprint of the most comprehensive and strategic plans to eliminate health disparities in our country.

I urge my colleagues to support the Health Equity and Accountability Act of 2014.

RISE OF ISLAMIC FASCISM

The SPEAKER pro tempore. The Chair recognizes the gentleman from California (Mr. McCLINTOCK) for 5 minutes.

Mr. McCLINTOCK. Mr. Speaker, we are watching the rise of Islamic fascism on a scale unprecedented in modern times. It may be wrapped in different symbols and trace genealogy through a different line, but at its core, it is fascism. Listen to its virulent anti-Semitism, the explicit promise of genocide against Israel, the utter rejection—indeed, disdain—for fundamental principles of democracy and human rights and justice. There can be no doubt what is happening.

European fascism might have consumed all of Europe except for one gritty holdout: for more than a year Great Britain stood in the breach. Had it fallen, the consequences would have been unthinkable.

Today, one gritty holdout stands against the rise of Islamic fascism in the Middle East. Israel is the only island of democracy and civilization left in that region, and it is standing alone and in the breach.